2001 MICHIGAN Qualified Adoption Expenses

This form issued under authority of P.A. 393 of 2000. Filing is voluntary.

Attach to form MI-1040. Please type or print clearly in blue or black ink.				Attachment Sequence No. 10		
Filer's Name			Social Secu	rity Number		
You must complete form U.S. 8839, Qualified Adop of your completed U.S. 8839 to receive a Michigan	•	es, prior to completing	this form.	You must atta	ich a copy	
PART 1 INFORMATION ABOUT YOUR ELIGIBL Complete Part 1 below using information provided of						
A. Child's Name	B. Child's Year of Birth	C. Child's Identifying I	Number	D. Qualified Expense For Each Child		
) 1.	>	•)	\$.00	
▶ 2.	>	•	,	\$.00	
▶ 3.	>	•)	\$.00	
) 4.	>	•	,	\$.00	
5. Total qualified expenses. Enter total of Column D				\$.00	
PART 2 ADOPTION CREDIT						
6. Enter total number of eligible children from Part	1 •					
7. Enter amount from line 12 of U.S. 8839			> 7	y. <u>\$</u>	.00	
8. Subtract line 7 from line 5. If line 7 is larger than line 5, enter zero			▶ 8	s. \$.00	
9. Multiply line 6 by \$1,200			▶ g). <u>\$</u>	.00	
10. Enter the smaller of line 8 or line 9 here and on line 32 of your MI-1040			b 10	<u>\$</u>	.00	